Date:

Location:

1. Adult or young person’s details (the participant)

|  |  |
| --- | --- |
| Name: | |
| Home Address: | |
| Post code: | Date of birth: |
| Telephone number: | Email: |

1. Parent or carer’s details (if the child is under 18 years old or the participant does not have the mental capacity to consent)

|  |  |
| --- | --- |
| Name: | |
| Home Address: | |
| Post code: | Date of birth: |
| Telephone number: | Email: |

1. If there’s an emergency, please contact (only fill in if different from the person named above):

|  |  |
| --- | --- |
| Name: | Relation to person: |
| Home Address: | |
| Post code: | Date of birth: |
| Telephone number: | Email: |

1. Child or adult’s medical details

|  |  |
| --- | --- |
| GP: | |
| Address:  Post code: | |
| Telephone number: | Email: |

1. Please provide details of any medical conditions or allergies that may affect your ability to participate in horse care sessions or which an instructor should be aware of

If you have answered yes to question 5, please detail any medical plans or alert cards (e.g asthma, epilepsy, allergies). Medical plans and alert cards must be present at every session attended.

Please note we are unable to administer medication, if a child/adult needs medication on site this must be provided by a parent, carer, guardian, the individual, or health care professional. Inhalers and Auto injectors (epipens) are the only medication that can be administered as an immediate first aid treatment in an emergency.

Is there anything else you think we should know?

1. Consent

If a child is under 18 years old or does not have the maturity and mental capacity to make their own decisions about whether they want to be involved in an activity consent will be obtained from a parent, guardian, carer, or health care professional.

I consent (or give consent) to take part in the activities listed below

I agree to (please tick):

Leading the ponies in walk and trot and around cones etc under supervision

Pony games - this includes activities such as leading the horses around obstacles and relaying objects (for instance transferring an object such as a ball)

Feeling/preparing the horses snack

About the horses - parts of the horse, horse health, horse behaviour and the horses likes and dislikes

Equine care – grooming and stroking the horses, this may include picking out the horses feet.

If there are additional activities consent will be sought prior to the activity, if there are any activities you do not feel comfortable with, please speak to your instructor and this can be changed.

Date

Signature

Print Name

6.1 Data Protection

Let’s Enable is a CIC that needs to retain and process certain data to enable the efficient running of the business and for health and safety purposes. Data will only be kept for as long as it is relevant to the purpose for which it was collected, or for as long as we are required to keep it by law.

Data Protection Act 1998 and 2018: I understand that the data given will be held in accordance with the Data Protection Act but may be shared with insurers, health care professionals and other concerned parties in the event of injury or accident and in accordance with the law.

I give consent to be contacted by the following means of communication:

Phone  Text message  Email  Post

I give consent for:

Let’s Enable to keep a record of this form for health and safety purposes.

Let’s Enable uses photographs and videos for our website, progress records, social media and funding applications. If you agree to Let’s Enable taking and using photographs or videos please tick (if you do not consent, please leave blank):

being filmed or photographed during the activity, with the possibility that these photographs/media recordings may be used for publications or marketing publicity, Let’s Enable’s social media (names will not be used in any such posts) and the website. (Let’s Enable will take all steps to ensure these images and videos are used solely for the purposes for which they are intended)

Funding Applications and progress records

Note: if consent is not given, Let’s Enable will not use any images or videos taken during the activity that contain the individual.

In some circumstances we may anonymise your personal data (so that it can no longer be associated with you) for progress records, research, statistical purposes, in which case we may use this information indefinitely without further notice to you.

Date

Signature

Print name

7. Let’s Enable aims to provide a safe and enjoyable experience for every participant.

To help us do this, please note the following important information.

• All questions on the consent form must be completed and signed by the participant, parent, or carer before they take part.

• Parents, carers and individuals must ensure they notify us of any changes to the information given on the form.

• Parents and carers must make arrangements for adults and children to be brought to and from the activity safely and on time. If a parent or carer is not able to collect the participant, they need to let us know in advance who will be doing so.

• We cannot take responsibility for any damaged clothing and/or personal items during the activity.

• Parents and carers should ensure participants have sufficient water, food, clothing, sun lotion and medication (where appropriate) for the duration of the activity.

I agree to (please tick):

any medical treatment that may need to be given in an emergency

I agree to talk to Nina Linzell (or relevant person) if I am not comfortable at any time during the activity so they can help me, or arrange for me to do something else

I understand that I must obey the instructions of the instructor and must comply with the health and safety requirements of the establishment, including any safety equipment of my own, being up to standard, approved and checked by senior staff

I acknowledge there is always an element of risk when working with horses and all horses may react unpredictably on occasion and it is my choice to participate in the sessions. Let’s Enable and Summerfield Stables are not liable for any injury or damage unless it is caused by their negligence

I understand that the participant needs to follow the behaviour code and any safety rules so that Let’s Enable can keep them and other people safe.

I confirm that to the best of my knowledge all the above details are correct

I have read and agree to all the above statements

I have read and agree to the cancellation policy attached

I have read and agree to Let’s Enable’s policies (found on the website, paper copies provided upon request).

If signing on behalf of a participant, please state relationship:

Date:

Name (please print):

Signature:

**Terms and conditions**

1. **General Terms and Conditions**

Let’s Enable reserve the right to change the requested session type based upon the risk assessment.

1. **Cancellation policy**

**Individual sessions**

24 hours’ notice needs to be given for a full refund, if a session is cancelled on the day, the full amount of the session will be charged. Sessions may be cancelled by Let’s Enable.

**Group bookings**

The minimum booking for groups is blocks of 4. No refunds are available for group bookings, times and dates will be agreed upon enrolment of the group to ensure client availability. Sessions may be cancelled by Let’s Enable.

**Block bookings**

Block bookings of 4 (paid in advance) are entitled to a complimentary 45 minute theory session.

1. **Weather**

Let’s Enable has the right to cancel sessions should the weather be deemed to be unsafe. Refunds will not be given, but a credit voucher issued.

**Late payment policy**

Payment is expected within 7 days of receiving the invoice, after 7 days a late payment notice will be sent and if the invoice is not paid within 48 hours late payment fees will be charged (20% of invoice total).